

MEDICAL DIRECTION COMMITTEE MEETING

January 15, 2004

Members Present

Peter Bruzzo, M.D.
Cheryl Haas, M.D.
George Lindbeck, M.D.
Mark Franke, M.D.
John Rawls, M.D.
Stewart Martin, M.D.
Kimberly Mitchell, M.D.
Carol Gilbert, M.D.

Others Present

Scott Weir, M.D.
Petra Menzel
Suzi Silversten
Joe Lang, M.D.
Jeffrey Reynolds
Michael Berg
Lisa Kapowich, M.D.

Staff

Warren Short
Tom Nevetral
Chad Blosser
Steve Puckett
Gary Brown
Scott Winston

Item 1): Stewart Martin, M.D. (Chair) called the meeting to order at 10:35 AM in the conference room at the Office of EMS.

Item 2): Those present were asked to introduce themselves.

Item 3): Motion by John ~~Potter~~ Rawls, M.D. and Peter Bruzzo, M.D. to approve the minutes of the October 16, 2003 meeting as written... Motion passed.

Item 4): It was announced that John Potter, M.D. has some information on how to best administer epinephrine at the EMT-Basic level as well as how to best implement training. The sub-committee will provide more information and a specific recommendation on this issue at the next meeting.

Item 5): Staff provided the committee with a comparison sheet on existing Difficult Airway Management Trainer Specifications for discussion. It was suggested that vendors be requested to attend the next meeting to demonstrate their manikins and be available to answer questions from the committee. The committee requested that a spread sheet be provided at the next meeting that contains the specifications in a comparison format for each of the manikins. Warren Short advised the committee that there are funds available to purchase a selected manikin for each of the accredited training programs and thereby was asking the committee for action on the selection of the Difficult Airway Management Trainer specifications at the next MDC meeting.

Item 6): Staff provided an update on the utilization of American Safety and Health Institute (ASHI) ACLS program. The ASHI program has a good curricula but staff has some reservations about the oversight of the program. It does not have the same stringent oversight as the other approved national parent organizations that are approved by the Office of EMS. Presently ACLS Coordinators can announce the program for Category 1 credit as an ALS CE Program, but since there are concerns of oversight the MDC has requested the Professional Development Committee look into the issue.

Item 7): Carol Gilbert, M.D. advised that she would have more information on the Wilderness SAR, Pediatric Transport, and Flight Team's EMS Specialty Procedures and Medication Schedules at the next meeting. Stewart Martin, M.D. is investigating issues for the Dive Rescue Team.

- Item 8): Staff advised the committee to consider utilizing the current RN to Paramedic Program criteria and allow RN's to attend a traditional Paramedic Program for the outlined subjects and hour requirements to obtain their program requirements for National registry Testing at the Paramedic level. **Motion by George Lindbeck, M.D. and seconded by John Rawls, M.D. to accept the staff's recommendation... Motion passed.**
- Item 9): Staff was requested by the committee to determine the participants of the Pilot Intermediate '99 Program that was conducted in Virginia prior to NREMT having completed their Intermediate '99 certification examination. Those students were allowed to test at the Virginia Cardiac Technician level since no NREMT Intermediate examination was available. It was suggested that since these students had previously completed an Intermediate '99 program they would be allowed to test at the Virginia Intermediate '99 level by successfully completing the Virginia Intermediate '99 written certification examination. Written permission must be obtained from their OMD to be allowed this option. **Motion by George Lindbeck, M.D. and seconded by John Rawls, M.D. to accept the staff's recommendation... Motion passed.**
- Item 10): Warren Short provided the committee with an overview of all of the BLS and ALS test scores that have been taken over the years.
- Item 11): Information on the Farmville Police Oxygen Administration Pilot Program was distributed and discussed. It was stated that there was excellent physician oversight on the pilot program. The committee requested that Edward Gordon, M.D. be requested to attend the next meeting to answer some of the committee's questions concerning this program.
- Item 12): Mark Franke, M.D. and colleagues will present some information on the Northern Virginia Rapid Sequence Induction Program at the next Medical Direction Committee on April 15, 2004.
- Item 13): The committee reviewed two documents: *Annals of Emergency Medicine December 2003- Incidence of Transient Hypoxia and Pulse Rate Reactivity During Paramedic RSI* and *Out of Hospital RSI: Are We Helping or Hurting Our Patients?* The committee also stated that there was an article printed in the *Journal of Trauma* Oct/Nov Issue that should be of interest. The committee concluded that all programs providing RSI in Virginia should be closely monitored by the OMD for quality assurance, effectiveness, complications, etc.
- Item 14): The committee suggested that Physician Assistants (P.A.) and Nurse Practitioner (N.P.) be allowed to complete the thirty-six hour EMT-Basic CE and then challenge the EMT-Basic written and practical certification examinations. The P.A. and the N.P. would be required to demonstrate competency throughout the required Paramedic competencies and then complete the team leader skills. The candidate would then request the endorsement by signature from the local EMS Physician (OMD/PCD). The Paramedic Program Committee will develop the field verification form.

- Item 15): Staff gave an update on the ALS Training Funds program and accreditation to date.
- Item 16): Warren Short advised that the Office is looking to pilot a web based CE program.
- Item 17): Warren advised that the OEMS move to the Madison Building was completed and there have been some issues with mail being received late. Division of Educational Development is taking this issue into account with providers certification issues.
- Item 18): The committee was advised of an issue with California Paramedic candidates being allowed to take their NREMT certification examinations prior to them completing the California program. The procedure is if the candidate does not complete the California program then NREMT is advised and the NREMT revokes the candidates NREMT Paramedic certification. If the candidate has already requested reciprocity from Virginia the OEMS may never find out that the NREMT revoked their NREMT Paramedic certification. Therefore the Virginia Office of EMS is submitting a Certification History Check to any candidate's State Office of EMS to determine eligibility for Intermediate' 99 or Paramedic status in that state prior to issuing Virginia reciprocity.
- Item 19): Gary Brown gave a Legislative Overview of EMS Bills of Interest. Included is a copy of the 2004 Office of EMS Legislative Grid. Office of EMS staff is keeping an eye on a couple of particular Bills of Interest.
- Item 20): Warren Short mentioned that the Office of EMS has completed an update to the Strategic Five Year Plan and the committee will be reviewing it after it is presented to the Advisory Board.
- Item 21): It was announced that the Office of EMS web page now closely follows the VDH web page. The OEMS web page has expanded and updated its contents recently.

It was also noted that there would be an OMD Course held on February 9, 2004 at the Homestead Resort.

Physicians will host another Advanced Airway Class at the 2004 Symposium and Carol Gilbert, M.D. asked if MDC should be involved in a Point / Counter Point discussion on RSI?

Meeting Adjourned at 1:30 PM

NEXT MEETING: April 15, 2004 at the Office of EMS at 10:30 AM